

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
OFFICE CLASSIFIER		19	8-31-01
FORMALITY REVIEW	ZK	1120	8-31-01
RESPONSE FORMALITY REVIEW	Request	925	10-29-01

INDEX OF CLAIMS

Rejected N  
 Allowed 1  
 (Through numeral) Canceled A  
 Restricted 0  
 Non-elected  
 Interference  
 Appeal  
 Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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932  
 08-31-01  
 525  
 10/29/01